# 2015:10:16:0%:00027844

# HAND DELIVERED

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2015 OCT 15 PM 3: 20

FEC FORM 3X

Rev. 12/2004

Office Use Only

1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		mple: If typing, r the lines.	type 12	FE4M5		
Ιŗ	nternational	Chiropractor	s Associa	ation Pol	litical	Action Co	ommittee	
Ш					11111			
ADE	ORESS (number and stree	•		ılevard <sub>ı</sub>				
_	Check if different	Suite 800			<u> </u>			
_	than previously reported. (ACC)	Falls Chu	rch			22042	2	
2.	FEC IDENTIFICATION	N NUMBER ▼	CITY ▲		STAT	E <b>A</b>	ZIP CODE A	
	C 0,0329920		3. IS THIS REPORT	X NEV	V OR [	AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	(b) Monthly Report I Due On:	Feb 20 (M2)	May	20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)	
	(a) Quarterly Reports:	Due On.	Mar 20 (M3)	Jun	20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)	
	April 15 Quarterly Repo	ort (Q1)	Apr 20 (M4)		20 (M7)	Oct 20 (M10)	Jan 31 (YE)	
	July 15 Quarterly Repo	ort (Q2)		Primary (12P)	F-1	General (12G)	Runoff (12R)	
	October 15 Quarterly Repo	Report f	or the:	Convention (120	<sup>5)</sup> L	Special (12S)	•	
	January 31 Year-End Repo	ort (YE)	Election on	M M / D	<u> </u>	•••	in the State of	
	July 31 Mid-Ye Report (Non-e Year Only) (M	lection (d) 30-Day	السا	General (30G)		Runoff (30R)	Special (30S)	
	Termination Re (TER)		Election on	/ E	<u> </u>	•••	in the State of	
5. Covering Period 07 01 1 2015 through 09 7 30 7 2015								
	I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.							
Тур	Type or Print Name of Treasurer Ronald M. Hendrickson, Assistant Treasurer							
Sigr	nature of Treasurer	Signature of Treasurer Date 10 / 15 / 2015						

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

FE7AN014

Office

Use

Only

# 2015-10-16-03-00027845

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

International Chiropractors Association Political Action Committee

2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 32**,**957.53 January 1, (b) Cash on Hand at Beginning of Reporting Period..... 5,852.40 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... 27,979.02 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....

### For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

FE6AN026

# 2015 - 10 - 16 - 0M - 00027846

## **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

International Chiropractors Association Political Action Committee

R	eport Covering the Period: From: $0.7$	01 2015 To	09  30  2015		
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other  Than Political Committees				
	(i) Itemized (use Schedule A)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	(ii) Unitemized	,2,340.00	5,852.40		
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	2,340.00	5,852.40		
	(b) Political Party Committees				
	(c) Other Political Committees (such as PACs)				
	(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry				
	Totals to Line 33, page 5)▶	,2,340,00	5,852.40		
12.	Transfers From Affiliated/Other Party Committees				
	ary committees				
13.	All Loans Received				
14.	Loan Repayments Received				
15.	Offsets To Operating Expenditures				
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)				
16.	Refunds of Contributions Made				
	to Federal Candidates and Other				
17.	Political Committees Other Federal Receipts		7		
	(Dividends, Interest, etc.)				
18.	Transfers from Non-Federal and Levin Funds (a) Non-Federal Account				
	(from Schedule H3)				
	(b) Levin Funds (from Schedule H5)				
	(c) Total Transfers (add 18(a) and 18(b))				
19.	Total Receipts (add Lines 11(d),				
	12, 13, 14, 15, 16, 17, and 18(c))▶	,,,,2,340.00	5,852.40		
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	2,340.00	5,852.40		

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	perating Expenditures: a) Allocated Federal/Non-Federal		Jaionaai Idai-to-Date
(a	Activity (from Schedule H4)		<del></del>
	(i) Federal Share		
	.,		
	(ii) Non-Federal Share		1 492 1 1 472 1 1 472 1 1 472 1 1 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4 472 1 4
(b	o) Other Federal Operating		
	Expenditures	3,658.13	9,830.91
(C	c) Total Operating Expenditures	***********	
_	(add 21(a)(i), (a)(ii), and (b))▶	, , , , , , , , , , , , , , , , , , , ,	9,830.91
	ransfers to Affiliated/Other Party		
	ommitteesontributions to	, <u>,,,0,0,0,,,0,0</u>	1,000.00
F	ederal Candidates/Committees		
	nd Other Political Committees		
	dependent Expenditures		
, (u	ise Schedule E)oordinated Party Expenditures		473 4 473
- (5	32 U.S.C. § 30116(d))		
(u	se Schedule F)		
	een Denoumente Made		
L(	oan Repayments Made	413 413 413	492 492
Lo	nana Mada		
R	oans Made efunds of Contributions To:	4)2 4 4)2 4	<u> </u>
(a	a) Individuals/Persons Other Than Political Committees		
	man Folitical Committees		423 4 423 4 423
(b	o) Political Party Committees		
(c			
,,	(such as PACs)		1
	<b>(</b>		
(d	f) Total Contribution Refunds		<del></del>
	(add Lines 28(a), (b), and (c))▶		
0	ther Disbursements		
F	ederal Election Activity (52 U.S.C. § 30101(2	0))	
(a	a) Allocated Federal Election Activity		
	(from Schedule H6)	<del></del>	<del></del>
	(i) Federal Share		
	(ii) "Levin" Share	92 93 43	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
(t	b) Federal Election Activity Paid Entirely	<del></del>	<del></del>
	With Federal Funds		
(c	,	* * * * * * * * * * * * * * * * * * * *	<del></del>
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	A 175 A 4 4 27 A 4 275 A	A 1 2/2 A 1 2/2 A 1 2/2
_			
	otal Disbursements (add Lines 21(c), 22,	<del></del>	<del> </del>
2	3, 24, 25, 26, 27, 28(d), 29 and 30(c))	4,658.13	<u>, 10,830.91.</u>
_	Stall Federal Dishaus .		
	otal Federal Disbursements		
	subtract Line 21(a)(ii) and Line 30(a)(ii)	4 650 10	10 000 (1
tr	om Line 31)	4,658.13	10,830.91

(from Line 15, page 3).....

(subtract Line 37 from Line 36) ......

38. Net Operating Expenditures

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 COLUMN A III. Net Contributions/Operating Ex-COLUMN B **Total This Period** penditures Calendar Year-to-Date 33. Total Contributions (other than loans) (from Line 11(d), page 3) ..... 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ........▶ 37. Offsets to Operating Expenditures

ITEMIZED DISBURSEMENTS	Use separate schedule(s) (chec		NUMBER: PAGE 1 OF 3
TEMIZED DIODORGEMENTO	for each category of the Detailed Summary Page	X 21b	22 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Statem		by any perse	on for the purpose of soliciting contributions
or for commercial purposes, other than using the nam	e and address of any political	committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		D. 7 '	
/ International Chiropract	tors Associatio	n Poli	tical Action Committee
Full Name (Last, First, Middle Initial)  A. Federal Express			Date of Disbursement
			المعقمة المعقم المعقم المعقم المعتملا
Mailing Address PO Box 371461			08 14 2015
	State Zip Code	250	
Pittsburgh Purpose of Disbursement	PA 152	250	
express shipping expense	e   [		Amount of Each Disbursement this Period
Candidate Name	-	Category/	63.24
OfAce Sought:   House   Disbursem	nent For:	Туре	
	Primary General		
President XX State: District:	Other (specify) <b>y</b> Administration	ı	
Full Name (Last, First, Middle Initial)		=	
B. US Postal Service	•		Date of Disbursement
Mailing Address 800 West Broad S	treet	<del></del>	08 14 2015
City Falls Church	State Zip Code VA 22	2042	
Purpose of Disbursement	F	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
postage for member mailing	ng		Amount of Each Disbursement this Period
Candidate Name		Category/ Type	\$122.10
OfAce Sought: House Disbursem			
	Primary General Other (specify)		
State: District:	Other (specify)  Administration	1	
Full Name (Last, First, Middle Initial)			Date of Dishusanast
C. Michael Griesmer	÷		Date of Disbursement
Mailing Address	Poulovard	<u> </u>	09 04 2015
City Falls Church	State Zip Code 2204	12	
Purpose of Disbursement	VA 2209		
software service reimbur	sement		Amount of Each Disbursement this Period
Candidate Name		Category/ Type	\$250.00
OfAce Sought: House Disbursen	nent For:	, yhe	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	Primary General		•
State: District:	Other (specify) \ \ Administration		
CURTOTAL of Dishusances This Dane (and and			
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	
TOTAL This Period (last page this line number only)		······	

SCHEDULE	В	(FEC	Form	3X)
ITEMIZED D	ISB	URSE	MENT	S

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 2 OF 3		
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)		
	Detailed Summary Page	XX <sup>21b</sup>	22 23 24 25 26 28a 28b 28c 29 30b		
Any information copied from such Reports and Statem	nente may not be cold or year	by any perso			
or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
> International Chiropract	tors Associatio	n Polit	cical Action Committee		
Full Name (Last, First, Middle Initial)		· T			
A. US Postal Service			Date of Disbursement		
			09 <sup>M</sup> ' 01° ' (2015)		
Mailing Address 800 West Broad St	treet		لحضيا لحصا		
	State Zin Code	042			
Purpose of Disbursement	FM				
postage for member mailing	ng		Amount of Each Disbursement this Period		
Candidate Name		Category/	\$34.50		
OfAce Sought: House Disbursem	nent For:	Туре	100.4.30		
Senate	Primary General				
President XX	Other (specify) ▼ Administration				
State: District:  Full Name (Last, First, Middle Initial)					
3.			Date of Disbursement		
Federal Express			( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )		
Mailing Address PO Box 371461			2013		
Pittsburgh	State Zip Code PA 152	50			
Purpose of Disbursement			Amount of Each Dishusses this De		
express shipping expense Candidate Name	[		Amount of Each Disbursement this Period		
		Category/ Type	\$27.57		
OfAce Sought: House Disbursen					
	Primary ☐ General  Other (specify) ▼	}			
State: District:	Administration	<u> </u>			
Full Name (Last, First, Middle Initial)					
Federal Express		ļ	Date of Disbursement		
Mailing Address			09 14 2015		
PO Box 371461	71-0-1-				
City Pittsburgh	State PA Zip Code 15	250			
Purpose of Disbursement	ſ				
<u>express shipping expens</u> Candidate Name	e		Amount of Each Disbursement this Period		
		Category/ Type	\$290.72		
OfAce Sought: House Disbursen					
	Primary General Other (specify) ▼				
State: District: XX	Administration	1			
SUBTOTAL of Disbursements This Page (optional)		··········· <b>&gt;</b>			
TOTAL This Period (last page this line number only)					

SCHEDULE B (FEC FOIIII 3X)	I lice congrate cohodulo(c) I		NUMBER:	PAGE 3 OF 3	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		24	
	Detailed Summary Page	27	22 23 28b 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam	by any perso	on for the purpose of so solicit contributions from	eliciting contributions n such committee.		
NAME OF COMMITTEE (In Full)					
/ International Chiropracto	ors Association	Polit	ical Action	Committee	
Full Name (Last, First, Middle Initial)					
A. Halfway Services			Date of Disbursement		
Mailing Address 1061 Virginia	Ave.		[09"] / [12"]	′ 2015 ′	
	tate MD Zip Code 217	40			
Purpose of Disbursement award			America of E. C. Etc.		
Candidate Name		Category/ Type	Amount of Each Disk	\$120.00	
Office Sought: House Disbursem	nent For:	1346		السيالسية فيستالمن المبية ويس	
	Primary General				
State: District:	Other (specify) Tration	ı			
Full Name (Last, First, Middle Initial)	··· <del>·</del>	-	······································	<del></del>	
<b>B.</b> On-Line Image			Date of Disbursemer	nt '	
Mailing Address 1591 Williamspor	t_Drive		07 / 10	/ 2015	
City San Jose S	itate CA Zip Code 951	31	· · · · · · · · · · · · · · · · · · ·		
Purpose of Disbursement					
software expense		Amount of Each Disbursement this Period			
Canuluate Name		Category/ Type	,_,,	,\$2500.00	
Office Sought: House Disbursem					
	Primary General Other (specify) ▼				
State: District: X.X	Administration	١			
Full Name (Last, First, Middle Initial)			Date of Disharas		
C. Michael Griesmer			Date of Disbursemen	\ <b>፟</b> ፟፟፟፟፟፟፟፟፟፟	
Mailing Address 6400 Arlington Boulevard			0724	201.5	
	itate VA Zip Code 220	14			
Purpose of Disbursement software service			Amount of Each Dist	oursement this Period	
Candidate Name		Category/ Type	31 Zadii 5161	\$250.00	
Office Sought: House Disbursem			tersebenederal descheerd		
	Primary ☐ General Other (specify) ▼	į			
State: District: XX	Administration	ı .	<del>-</del>		
SUBTOTAL of Disbursements This Page (optional)					
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SOFIEDOLE D (FEO FOILITOR)	FOR LINE		PAGE 1	<u> </u>			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	<u> </u>	24 725	26		
	Detailed Summary Page	H <sub>27</sub>	22 X 23				
Any information against from such Departs and Class	ionto mou not be cold or						
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)							
International Chiropracto	rs Association	Politi 	.cal Acti 	on Commit	tee		
Full Name (Last, First, Middle Initial)							
A. Jim Jordan for Congress			Date of Disbursement				
Mailing Address 1709 State Rout	Mailing Address 1709 State Route 560 South  City Urbana State OH Zip Code 43028			09 7 12 / 2015			
City Urbana s							
Purpose of Disbursement		<b>⊃√</b>					
·			Amount of Ea	ch Disbursement thi	is Period		
Candidate Name  Rep. Jim Jordan		Category/		\$1,00	0.00		
<del>-</del>		Туре		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	لحصي		
Office Sought: XX House Disburser	nent For:  Primary General						
Procident	Other (specify)						
State: OHio District: 4th	(opee)/ ▼						
Full Name (Last, First, Middle Initial)							
B.				Date of Disbursement			
			المعمددا العندا المعمدا				
Mailing Address							
City	tate Zip Code						
Purpose of Disbursement							
Candidate Name  Category/			Amount of Each Disbursement this Period				
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		Type					
Office Sought: House Disbursem							
	Primary General						
State: District:	Other (specify) ▼			•			
Full Name (Last, First, Middle Initial)							
C.			Date of Disbu	rsement			
			Control Co		~~~~		
Mailing Address							
City	state Zip Code			<del></del>	<del></del>		
Purpose of Disbursement	r						
Candidate Name			Amount of Ea	ch Disbursement th	is Period		
Candidate Name		Category/ Type					
Office Sought:   House   Disbursen	nent For:	, , pe	المساسم المسالم	- 1111111111111-			
	Primary General						
President	Other (specify) ▼						
State: District:							
SUBTOTAL of Disbursements This Page (optional)							
TOTAL This Period (last page this line number only)		····· •		\$.1.,.0.0.0	0.0.		
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# Hand Delivered

# Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered	Date of Receipt
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	Postmarked (R/C)
USPS Registered/Certified	,
	Postmarked
USPS Priority Mail	1 Ostillarica
	Postmarked
USPS Priority Mail Express	
Postmark Illegible	
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Overnight Delivery Service (Specify):	Shipping Date
Next Busines	ss Day Delivery
	Date of Receipt
Received from House Records & Registration Office	
	Date of Receipt
Received from Senate Public Records Office	
	Data of Dansint
Received from Electronic Filing Office	Date of Receipt
	Receipt or Postmarked
Other (Specify):	
1	. 1
1/2	10/16/18
PREPARER	DATE PREPARED
(3/2015)	